

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE  
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION  
OF RIGHTS TO THE USE OF WATER FROM  
THE COEUR D'ALENE-SPOKANE RIVER  
BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

ID Number: 94-9388

Date Received: 4-2-2015

Receipt No: N031138

Amount: 25.00 By: LW

NOTICE OF CLAIM  
TO A WATER RIGHT  
ACQUIRED UNDER STATE LAW

RECEIVED

APR - 2 2015

IDWR/NORTHERN

Please type or print clearly

1. Name of claimant(s) Dennis A. Riley Phone 208-1689-9237  
Mailing address 3554 E. Sunset Dr Harrison ID ZIP 83833  
Street or Box City State
2. Date of priority (only one (1) per claim) 5/1/1965  
Month Day Year (yyyy)
3. Source of water supply (check one) Ground Water ( ) or Other (X) (a) unnamed stream (spring)  
which is tributary to (b) \_\_\_\_\_
4. a. Location of point of diversion is: Township 47N, Range 03W, Section 21,  
SW 1/4 of NW 1/4, or Govt. Lot \_\_\_\_\_, B.M., County of Kootenai  
Parcel (PIN) no. NA  
Additional points of diversion if any: \_\_\_\_\_  
If available, GPS coordinates: \_\_\_\_\_  
b. If instream flow, beginning point of claimed instream flow is: Township \_\_\_\_\_, Range \_\_\_\_\_,  
Section \_\_\_\_\_, \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4, or Govt. Lot \_\_\_\_\_, B.M., County of \_\_\_\_\_  
ending point is: Township \_\_\_\_\_, Range \_\_\_\_\_, Section \_\_\_\_\_, \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 or  
Govt. Lot \_\_\_\_\_, B.M., County of Kootenai
5. Description of existing diversion works (dams, reservoirs, ditches, wells, pumps, pipelines, headgates, etc.),  
including the dates of any changes or enlargements in use, the dimensions of the diversion works as  
constructed and as enlarged and the depth of each well.  
Dam Pond is 215' long x 135' w x 5' d

6. Water is claimed for the following purposes:

(both dates are inclusive mm-dd) (cfs) (acre-feet)

For stock purposes from 1/1 to 12/31 amount .02 or .02

For domestic purposes from 3/15 to 8/11/15 amount .02 or .02

For storage purposes from 1/1 to 12/31 amount \_\_\_\_\_ or 3.3

For \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ amount \_\_\_\_\_ or \_\_\_\_\_

7. Total quantity claimed (a) .04 (cfs) and/or (b) 3.3 (acre-feet)

8. Non-irrigation uses; describe fully (e.g. Domestic: give number of households served; Stockwater: type and number of livestock, etc.): Stockwater (H) 1/2 acre tree irrigated

9. Description of place of use:

- If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- If water is used for other purposes, place a symbol of use (e.g. D for domestic) in the corresponding place of use below. See instructions for standard symbols.

Twn	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
<u>47N</u>	<u>3W</u>	<u>21</u>							<u>D/S</u>										

Parcel (PIN) no(s). \_\_\_\_\_

Total number of acres irrigated \_\_\_\_\_

10. In which county(ies) are lands listed above as place of use located? Kootenai

11. Do you own the property listed above as place of use? Yes (X) No ( )

If your answer is no, describe in remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

None or None ( )

13. Remarks:

attached are aerial photos from 1965 & 1970

Last name \_\_\_\_\_ Identification no. \_\_\_\_\_

Scale: 2 inches equals 1 mile

see aerial photo

Last name \_\_\_\_\_ Identification no. \_\_\_\_\_

14. Basis of claim (check one) Beneficial Use (X) Posted Notice ( ) License ( ) Permit ( ) Decree ( )

Court \_\_\_\_\_ Decree Date \_\_\_\_\_ Plaintiff v. Defendant \_\_\_\_\_

If applicable, provide IDWR water right number \_\_\_\_\_

15. Signature(s)

a. By signing below, I/we acknowledge that I/we have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Adjudication".

b. I/We do ( ) do not (X) wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 2

For individuals:

I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of claimant(s) Dennis Shiley Date: 3/27/15

Lisa Hawdon Date: 3/27/15

For organizations:

I do solemnly swear or affirm under penalty of perjury that I am

\_\_\_\_\_ of \_\_\_\_\_,  
Title Organization

that I have signed the foregoing document in the space below as

\_\_\_\_\_ of \_\_\_\_\_,  
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of authorized agent \_\_\_\_\_ Date \_\_\_\_\_

Title and organization \_\_\_\_\_

16. Notice of appearance:

Notice is hereby given that I, \_\_\_\_\_, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Last name \_\_\_\_\_ Identification no. \_\_\_\_\_